

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF NEW YORK**

In re:

LEHMAN BROTHERS HOLDINGS INC

**Lehman Borthers Commodity
Services, Inc.**

("the Debtors")

Chapter 11

Case No. 08-13555 (JMP) Jointly
Administered

Case No. 08-13885

Claim No.: 14018

**NOTICE OF TRANSFER OF CLAIM PURSUANT TO F.R.B.P. RULE 3001 (E)(2) FOR FILED
CREDITOR, SUMMIT PETROLEUM LIMITED, IN THE AMOUNT OF \$5,616,462.50, TO C.V.I
G.V.F. (LUX) MASTER S.A.R.L.**

To Transferor:

Summit Petroleum Limited
F/K/A Oranje-Nassau (U.K.) Limited
c/o Lisa Beckerman
Akin Gump Strauss Hauer & Feld, LLP
One Bryant Park
New York, NY 10036

PLEASE TAKE NOTICE that the transfer of \$5,616,462.50 of the above-captioned general
unsecured claim has been transferred to:

Transferee:

C.V.I G.V.F. (Lux) Master S.a.r.l.
c/o CarVal Investors UK Limited
Knowle Hill Park
Farimile Lane
Cobham
Surrey KT11 2PD
United Kingdom

The evidence of transfer of claim is attached hereto. A copy of the Proof of Claim and a copy of the
Claims Agent website listing the claim are attached.

If your objection is not timely filed, the transferee will be substituted in your place as the claimant
on our records in this proceeding.

(FOR CLERK'S OFFICE USE ONLY):

This notice was mailed to the first named party, by first class mail, postage prepaid on _____, 2010.

INTERNAL CONTROL NO. _____

Copy: (check) Claims Agent ____ Transferee ____ Debtors's Attorney ____

Deputy Clerk

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK

In re:

Ch-11 LEHMAN BROTHERS COMMODITY
SERVICES, INC.

Debtor

Case No. 08-13885

Chapter 11

**NOTICE OF TRANSFER OF CLAIM
PURSUANT TO RULE 3001(e)**

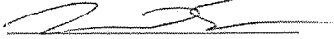
PLEASE TAKE NOTICE that any and all claims of Summit Petroleum Limited ("Assignor") that are scheduled by the Debtor(s) and or filed as an original or amended Proof of Claim against the Debtor(s), including but not limited to the following:

Proof of Claim Amount	Proof of Claim No.
\$5,616,462.50	14018


have been transferred and assigned to C.V.I. G.V.F. (Lux) Master S.a.r.l. ("Assignee"). The signature of Assignor on this document is evidence of the transfer of the claims and all rights thereto.


Assignor hereby waives any notice or hearing requirements imposed by Rule 3001 of the Bankruptcy Rules, and stipulates that an order may be entered recognizing this Assignment as an unconditional assignment and the Assignee herein as the valid owner of the Claim. You are hereby requested to make all future payments and distributions, and to give all notices and other communications, in respect of the Claim to the Assignee.

ASSIGNEE: CVI GVF (Lux) Master S.a.r.l.
Address: c/o CarVal Investors UK Limited
Knowle Hill Park
Fairmile Lane
Cobham
Surrey KT11 2PD
United Kingdom

Signature: 
Name: DAVID SHERRY
Title: OPERATIONS MANAGER
Date: _____

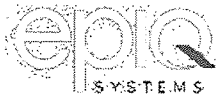
ASSIGNOR: Summit Petroleum Limited
Address: F/K/A Oranje-Nassau (U.K.) Limited
c/o Lisa Beckerman
Akin Gump Strauss Hauer & Feld, LLP
New York, NY 10036

Signature: 
Name: TATSUSHIRO KIMURA
Title: CFD
Date: 02/03/2010

United States Bankruptcy Court/Southern District of New York Lehman Brothers Holdings Claims Processing Center c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076		PROOF OF CLAIM	
In Re: Lehman Brothers Holdings Inc., et al. Debtors.	Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered)	UNIQUE IDENTIFICATION NUMBER: 885004280	
Name of Debtor Against Which Claim is Held LEHMAN BROTHERS COMMODITY SERVICES INC.	Case No. of Debtor 08-13885 (JMP)	THIS SPACE IS FOR COURT USE ONLY	
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.			
Name and address of Creditor: (and name and address where notices should be sent if different from Creditor) LBH (MERGE2, DBF, SCHED_NO) SCHEDULE #: 885004280***** SUMMIT PETROLEUM LIMITED F/K/A ORANJE-NASSAU (U.K.) LIMITED C/O Lisa Beckerman Akin Gump Strauss Hauer & Feld LLP One Bryant Park New York, New York 10036 Telephone number: (212) 872-8012 Email Address:		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____ <input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
Name and address where payment should be sent (if different from above) Oranje-Nassau Energie B.V. Rembrandt Tower, 22nd Floor Amsterdam, The Netherlands P.O. Box 95105, 1090 HC Amsterdam The Netherlands Telephone number: +31(0) 20 5677111 Email Address: One_Secretariaat@Oranje-Nassau.com		NOTICE OF SCHEDULED CLAIM: Your Claim is scheduled by the indicated Debtor as: SCHEDULE G – EXECUTORY CONTRACT OR UNEXPIRED LEASE DESCRIPTION: DERIVATIVE MASTER ACCOUNT NUMBER 011405ARPT	
1. Amount of Claim as of Date Case Filed: \$ 5,616,462.50 If all or part of your claim is secured, complete Item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete Item 5. If all or part of your claim qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9), complete Item 6. <input checked="" type="checkbox"/> Check this box if all or part of your claim is based on a Derivative Contract.* <input type="checkbox"/> Check this box if all or part of your claim is based on a Guarantee.* *IF YOUR CLAIM IS BASED ON AMOUNTS OWED PURSUANT TO EITHER A DERIVATIVE CONTRACT OR A GUARANTEE OF A DEBTOR, YOU MUST ALSO LOG ON TO http://www.lehman-claims.com AND FOLLOW THE DIRECTIONS TO COMPLETE THE APPLICABLE QUESTIONNAIRE AND UPLOAD SUPPORTING DOCUMENTATION OR YOUR CLAIM WILL BE DISALLOWED. <input checked="" type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of interest or additional charges. Attach itemized statement of interest or charges to this form or on http://www.lehman-claims.com if a claim is based on a Derivative Contract or Guarantee.		5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim: <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries or commissions (up to \$10,950), earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier – 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507(a)(5). <input type="checkbox"/> Up to \$2,425 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507(a)(____). Amount entitled to priority: \$ _____	
2. Basis for Claim: Derivative Contract (See instruction #2 on reverse side.)			
3. Last four digits of any number by which creditor identifies debtor: 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)			
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate _____ % Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____			
6. Amount of Claim that qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9): \$ _____ (See instruction #6 on reverse side.)			
7. Credits: The amount of all payments or 8. Documents: Attach redacted copies of itemized statements of running accounts, contracts providing evidence of perfection of a security interest, and attach a summary. DO NOT SEND ORIGINAL DOCUMENTS FOR SCANNING. If the documents are not available, please explain.		Filed: USBC - Southern District of New York Lehman Brothers Holdings Inc., Et Al. 08-13555 (JMP) 0000014018  of claim. purchase orders, invoices, and copies of documents are voluminous, DYED AFTER	
Date: 10/09/09 Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. Mr. T. Kimura (CEO – Corporate Coordination Officer) and Mr. Ken Lee (Financial Controller)		FOR COURT USE ONLY <div style="border: 2px solid black; padding: 10px; text-align: center;"> FILED / RECEIVED SEP 16 2009 EPIQ BANKRUPTCY SOLUTIONS, LLC </div>	

Claim Question? Call: 646 282 2400

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debtorMatrix

Lehman Brothers Holdings Inc. (Chapter 11)
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Criteria

Claim Number 14018	Creditor Name Name Starts With	Scope Claims and schedules
Schedule Number	Amount Total Claim Value Equals	
Claim Date Range to		
Debtor		

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Results

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Claim #	Schedule #	Creditor Name	Date	Total Claim Value	
14018	885004280	SUMMIT PETROLEUM LIMITED F/K/A ORANJE-NASSAU (U.K.) LIMITED C/O LISA BECKERMAN AKIN GUMP STRAUSS HAUSER & FELD LLP NEW YORK, NY 10036	9/16/2009 Claimed Unsecured:	\$5,616,462.50 \$5,616,462.50	Image
Debtor: Lehman Brothers Commodity Services Inc.					

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